STATE OF CALIFORNIA
DEPARTMENT OF PUBLIC HEALTH
WALTER M. DICKIE, M. D., DIRECTOR

Weekly Bulletin

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THE NO MEAT FAD.

By M. E. JAFFA, M.S., Chief, Bureau of Food and Drugs.

There have appeared in the daily press statements, both in the form of communications and advertisements, indicating directly or indirectly that meat is not advisable as a food and, furthermore, is the cause of certain diseases or disorders of metabolism. In view of these utterances it would seem pertinent to present facts for the purpose of conclusively proving how absolutely incorrect they are.

Meat when taken into the body can either build tissue or yield energy and therefore is a food. But as with cloth so with food: there are different qualities, low, medium and high. Similarly there are foods of low biological value, medium and high. The question is, to which class does meat belong? In order to answer this question we must have a yardstick or a means of measuring the biological value of a food or food product.

It is admitted by all that meat belongs to the class of nitrogenous or protein foods. It is, therefore, only necessary to deal with that class of foods. In other words, then, what is the measure of the biological value of a protein? It is its ability to

a. Build the muscles, brain, heart, liver and other deep-seated tissues of the body.

b. To repair the daily nitrogen wastes. Any protein which can *fulfill* these conditions is, biologically, eminently valuable, but those proteins with *high* digestion coefficients which can accomplish this purpose with the least outlay of internal energy on the part of the body are of the *highest* biological type. It must be remembered in this connection that every operation, every process of production on the part of the body, whether it be mastication, digestion, assimilation, respiration, etc., calls for an expenditure of internal energy usually expressed in calories. When any food is ingested a certain proportion of the total energy is lost in (a) the undigested material, (b) in the processes of production just referred to, sometimes called work of digestion. It is of great importance, therefore, to state that the protein and fat of meat possess very high digestion coefficients. In other words, then, there is lost to the body but *little* of the protein or fat when meat is eaten. In fact, it has been stated by eminent authorities that were it not for the "metabolic products" found in the excreta, the respective digestion coefficients for protein of meat, milk and eggs would be practically 100 per cent. This can not be stated of the protein of the cereals or that of any other food of vegetable origin.

Meat should be considered exceedingly important for the invalid and the convalescent, in that the system has been depleted of tissue and needs rebuilding, restrengthening. Meat, milk and eggs stand out prominently as sources of good protein; and in this connection it may be stated that meat has been proved especially valuable for the regeneration of the blood supply in anemia caused by loss of blood. This fact has been most conclusively confirmed by the experiments of Dr. George H. Whipple and associates at the Hooper Foundation for Medical Research, University of California Medical School. The result of their experiments showed that blood regeneration may be completed in two to four weeks with cooked liver as the protein food. Anemia will also be completely repaired within three to four weeks if the dog is given a liberal diet of meat or beef heart. The superiority of meat in this respect is more fully appreciated when Dr. Whipple states that a diet of white bread and skimmed milk may cause a slow, steady gain in blood pigment volume from week to week, but the time required for complete blood regeneration is six weeks or longer.

Many other illustrations could be given indicating that meat is a most valuable food for the invalid and the convalescent in that it supplies good protein most easily digested, and also contains flavors and extracts which at times are necessary to stimulate the stomach to better action than otherwise would be possible.

One of the best answers to those who oppose a meat diet is to quote from the life history of Vilhjalmur Stefansson as given in the journal of the American Medical Association, Vol. 7, No. 1, July 3, 1926. The following facts regarding S's life in the far north are noteworthy:

1. He spent altogether eleven and one-half years within the Arctic circle.
2. He lived for a number of days, totaling nine years, on an exclusive meat diet.
3. He reached his maximum weight while subsisting on meat (fish).
4. His sense of physical and mental well being was at its best during that period of his life.
5. He found that the exclusive meat diet worked as well when he was active as when inactive, and as well in hot weather as in cold.

It has been stated by opponents to the use of meat that the protein content of meat differs from that of milk and egg in that the latter two do not contain the nitrogenous extractives as does the former. These extractives are the nitrogen compounds found in soup, and particularly in meat extracts. It is these compounds which have given rise to the statements that meat is intrinsically poisonous, in that the nitrogenous extractives are conducive to the formation and retention of uric acid in the human system. Such theories are based primarily on the writings of Dr. Alexander Haig, an English physician, who published a book some years ago, indicating that many diseases were due to the eating of too much meat. Naturally in the commercial meat extracts these compounds predominate as far as protein is concerned, because such products are the result of the concentration of soups, and continued ingestion of them would be undesirable. The percentage, however, in ordinary meat as we find it is not sufficient to be in any way injurious or undesirable to the average healthy person, be it man, woman or child. And, furthermore, the uric acid theory of disease has been more or less exploded. It is true that no matter what the form of diet, there will be uric acid formed as one of the end products of digestion, but if a person's system is in good order and the kidneys working in a normal manner he need not be afraid in any way of an injurious effect from the uric acid produced. It will be eliminated. If, however, there is a pathological condition present, the case is different and a physician's advice is called for.

This important question might well be summarized as follows:

1. Meat is a food easily digestible and well assimilated.
2. Meat furnishes protein essential for:
   (a) Growth and optimum development in the young.
   (b) The maintenance of health and activity and the ability to work in the adult.
   (c) The invalid and convalescent.
   (d) Certain types of anemia.
3. The rational use of meat by the normal, healthy individual will not be productive of any pathological conditions; that is, will not bring about disease or disturbed metabolism.
4. The rational use of meat is one of the potent factors in preventing the so-called deficiency diseases, in that those living on an adequate diet have much greater resistant powers than those living on a low protein level.

"He cures the greatest number in whom most men have most faith."—Galen.

Announce Program For Food Clinic.

The program on the food clinic as a demonstration of the place of dietetics in the treatment of diseases, to be held at Lane and Stanford Hospital, San Francisco, January 16–28, is printed here. This clinic is to be directed by Miss Frances Stern, Chief of the Food Clinic of the Boston Dispensary, Boston, Massachusetts. It will be held under the auspices of the Stanford University Medical School and the California Tuberculosis Association. The program has been prepared by a committee, composed of Dr. Adelaide Brown, chairman; Dr. William Ophuls, Dr. R. G. Brodrick, Charlotte I. Sloan and Mrs. Edythe Tate Thompson. The evening sessions will be open to the general public. Morning sessions will be held for physicians only and afternoon conferences will be held with dietitians, social service workers and public health nurses. Following is the program:

Evening Program.

General Public.

Place—Auditorium of Nurses' Home, 2360 Clay street.

Time—8 p.m.

Dates—Monday, Wednesday and Friday, January 16, 18, 20, 23, 25 and 27, 1928.

Each lecture is supplemented by a food demonstration by Miss Stern.

First—January 16: Wm. Ophuls, M.D., presiding. Subject, Normal Diet. Alonzo E. Taylor, M.D., Lecturer Food Research Department, Stanford University.

Second—January 18: Frank W. Lynch, M.D., presiding. Subject, Prenatal and Diet of the Nursing Mother. Alice Maxwell, M.D., Professor of Obstetrics, Stanford Medical School.

Third—January 20: Mrs. H. A. Kluegel, presiding. Subject, The Runabout Child. Langley Porter, M.D., Dean University of California Medical School.

Fourth—January 23: Mrs. E. J. Mott, presiding. Subject. The School Child. Wm. C. Hassler, M.D., San Francisco City and County Health Officer.

Fifth—January 25: George E. Ebright, M.D., presiding. Subject, Obesity. Hans Lisser, M.D., Professor of Medicine, University of Calfornia Medical School.

Sixth—January 27: R. G. Brodrick, M.D., presiding. Subject, Diet in Disease. Arthur L. Bloomfield, M.D., Professor of Medicine, Stanford Medical School.

Program.

For Physicians Only.

Place—Lane Hall, Sacramento near Webster street.

Dates—Wednesday, Thursday and Saturday, January 18, 19, 21, 25, 26 and 28, 1928.

Hours—11.30 a.m. to 12.30 p.m.

First—January 18: General Medical Diseases. Dr. A. L. Bloomfield.

Second—January 19: Nephritis. Dr. T. Addis.

Third—January 21: Gastro-Intestinal Diseases. Dr. W. W. Boardman.

Fourth—January 25: Obesity. Dr. Hans Lisser.

Fifth—January 26: Preschool Child. Dr. W. P. Lucas. Underweight Child. Dr. H. K. Faber.

Sixth—January 28: Diabetes. Dr. D. E. Shepardson.

In each lecture Miss Stern will demonstrate, with a patient, the service of a food clinic in carrying out the diet prescribed by the physician.

Program.

Conferences with Miss Stern.

Place—Auditorium of Nurses' Home, 2360 Clay street (above Webster).

Time—4 to 6 p.m.

Dates—Tuesday and Thursday, January 17, 19, 24, 26, 1928. For dietitians, social service workers and public health nurses.

Subject—On the Social Significance of Food.

First—January 17: Charlotte I. Sloan, Dietitian, Stanford Hospital, presiding. Subject, To the Dietitian.

Second—January 19: Miss Ellen Bartlett, Domestic Science Department, San Francisco Public Schools, presiding. Subject, To the Home Economics Teacher.

Third—January 24: Mrs. Max Sloss, Community Chest, presiding. Subject, To the Social Worker.

Fourth—January 26: Eleanor Stockton, R.N., P.H.N., Health Department of San Francisco, presiding. Subject, To the Public Health Nurse.

Many Rats Killed by Los Angeles County Department.

In the December tenth issue of this publication mention was made of activities in rat extermination now carried on in many cities of California. The cities of Alhambra, Monrovia, Redondo Beach, Whittier, El Monte, Huntington Park and Arcadia were included among other cities engaged in this work but it was not stated that the activities carried on in these places are under the direction of Dr. John L. Pomeroy, health officer of Los Angeles County. These cities have entered into contract with the Los Angeles County Health Department to administer their public health affairs. The Los Angeles County Health Department is specially active in rat control work.

MORBIDITY.*

Diphtheria.

125 cases of diphtheria have been reported, as follows: Berkeley 4, Oakland 15, Oroville 1, Colusa 2, Fresno County 1, Fresno 1, Imperial 1, Los Angeles County 10, Burbank 2, Glendale 2, Long Beach 2, Los Angeles 28, Pasadena 2, San Fernando 6, San Gabriel 1, Whittier 1, Madera 1, Monterey County 2,

*From reports received on January 9th and 10th for week ending January 7th.

Napa County 1, Napa 1, Grass Valley 3, Orange County 4, Santa Ana 4, Sacramento 1, San Diego 2, San Francisco 15, San Joaquin County 1, San Bruno 1, San Mateo 1, Santa Clara County 1, Gilroy 1, Mountain View 1, San Jose 1, Sonoma County 1, Tulare County 3, Marysville 1.

Scarlet Fever.

159 cases of scarlet fever have been reported, as follows: Alameda County 1, Alameda 1, Berkeley 7, Oakland 19, Fresno County 9, Fresno 4, Humboldt County 1, Corcoran 1, Hanford 2, Los Angeles County 9, El Segundo 2, Hermosa Beach 1, Huntington Park 2, Long Beach 3, Los Angeles 21, Pasadena 2, Redondo Beach 1, Lynwood 2, Hawthorne 1, Monterey Park 1, Maywood 2, Sausalito 4, Alturas 1, Sacramento County 1, Sacramento 4, Ontario 1, Redlands 1, San Bernardino 1, San Diego 6, San Francisco 21, San Joaquin County 2, Stockton 5, San Luis Obispo 1, Santa Barbara 1, Santa Clara County 6, Gilroy 1, San Jose 4, Santa Cruz County 1, Solano County 1, Fairfield 1, Sonoma County 1, Turlock 2, Sonora 1.

Measles.

74 cases of measles have been reported, as follows: Berkeley 2, Oakland 2, Los Angeles County 1, Glendale 1, Los Angeles 10, San Fernando 2, Monterey Park 1, Sacramento 3, Redlands 1, San Diego County 4, Oceanside 3, San Diego 4, San Francisco 10, San Joaquin County 1, Stockton 1, San Luis Obispo County 1, San Luis Obispo 23, Mountain View 1, San Jose 1, Red Bluff 1, Tulare County 1.

Smallpox.

18 cases of smallpox have been reported, as follows: Alameda County 1, Berkeley 1, Oakland 8, Sacramento 2, San Francisco 3, Mountain View 1, Watsonville 1, Sonoma County 1.

Typhoid Fever.

Six cases of typhoid fever have been reported, as follows: Oroville 1, Los Angeles 1, Merced 1, San Joaquin County 1, Suisun 1, California 1.

Whooping Cough.

93 cases of whooping cough have been reported, as follows: Oakland 2, Fresno 2, Los Angeles County 5, Alhambra 1, Compton 5, Long Beach 7, Los Angeles 14, Pasadena 2, Salinas 2, Anaheim 2, Fullerton 4, Santa Ana 6, Tustin 5, San Diego County 9, La Mesa 1, San Diego 21, San Francisco 3, San Joaquin County 1, Palo Alto 1.

Poliomyelitis.

Nine cases of poliomyelitis have been reported, as follows: Los Angeles County 1, Los Angeles 1, Nevada County 1, Grass Valley 3, Sacramento 2, Vacaville 1.

Meningitis (Epidemic).

Five cases of epidemic meningitis have been reported, as follows: Los Angeles 1, Napa County 1, Sacramento County 1, San Francisco 1, Tuolumne County 1.

Encephalitis (Epidemic).

Santa Ana reported one case of epidemic encephalitis.

COMMUNICABLE DISEASE REPORTS.

Disease	1927–1928				1926-1927			
	Week ending			Reports for week ending Jan. 7 received by Jan. 10	Week ending			Reports for week ending Jan. 8 received by Jan. 11
	Dec. 17	Dec. 24	Dec. 31		Dec. 18	Dec. 25	Jan. 1	
Anthrax	0	0	0	0	0	0	0	0
Botulism	0	0	0	0	0	0	0	0
Chickenpox	260	243	203	410	259	230	275	416
Diphtheria	162	171	140	125	184	154	133	178
Dysentery (Bacillary)	0	1	0	0	1	4	5	1
Encephalitis (Epidemic)	0	0	3	1	0	4	2	1
Gonococcus Infection	110	90	68	125	79	62	94	103
Influenza	28	20	27	33	25	34	36	37
Jaundice (Epidemic)	0	1	0	0	0	0	0	0
Leprosy	0	0	0	0	2	1	1	2
Malaria	0	0	1	0	0	0	1	1
Measles	51	35	41	74	873	596	837	1115
Meningitis (Epidemic)	2	3	2	5	1	5	6	5
Mumps	92	69	65	90	137	57	108	128
Paratyphoid Fever	0	1	1	1	0	0	0	0
Pneumonia (Lobar)	57	48	144	79	51	97	154	109
Poliomyelitis	25	14	12	9	3	0	0	2
Rabies (Animal)	13	5	9	3	6	5	6	6
Rocky Mt. Spotted Fever	0	0	0	0	0	0	0	0
Scarlet Fever	191	191	172	159	274	252	199	220
Smallpox	27	14	20	18	4	10	8	20
Syphilis	204	85	109	123	101	78	119	264
Tetanus	0	1	3	0	0	1	2	0
Trachoma	0	1	1	2	87	5	7	0
Trichinosis	0	2	0	0	0	0	0	0
Tuberculosis	179	131	142	117	152	124	184	149
Typhoid Fever	7	14	8	6	16	17	24	24
Typhus Fever	0	0	0	0	0	0	0	0
Whooping Cough	83	56	55	93	41	52	55	85
Totals	1491	1196	1226	1473	2296	1788	2256	2866

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